

## Mental Health Services Oversight & Accountability Commission

## **Mental Health Triage Personnel Grant**

## **Process Information Report**

Date of Report:	3/31/15			Fren .
County Name:	Santa Barbara County			Long
Name of Contact:	Laura Zeitz	Phone N	lumber: 805 452	2760
		Email:	lazeitz@co.santa-bar	bara.ca.us
	er of Triage Person Il-time Equivalents FTE		to Date	
a. County	Staff Total	18.5		FTEs
b. <u>Contrac</u>	t Staff Total	1.0		FTEs
(Identify in Fu	er for each type of F II-time Equivalents FTE low- please specify in t	Es. If the sta	aff hired do not	fit the
a. County	Staff			
i. C	ase Managers	6.0		FTEs
ii. S	ocial Workers	1.0		FTEs
iii. N	urses	0.5		FTEs
iv. C	linicians	5.0		FTEs

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vi.	Peer Providers	6.0	FTEs
vii.	Outreach Workers	0	FTE
viii.	Psychiatrists		FTEs
ix.	Other		
			FTEs
-			
ontra	nct Staff		FTEs
ontra	Case Managers		FTEs FTEs
i.	Case Managers Social Workers		FTEs
i. ii.	Case Managers Social Workers		FTEs
i. ii. iii.	Case Managers Social Workers Nurses Clinicians		FTEs FTEs
i. ii. iii. iv.	Case Managers Social Workers Nurses Clinicians Mental Health Workers		FTEs FTEs FTEs
i. ii. iv. v.	Case Managers Social Workers Nurses Clinicians Mental Health Workers		FTEs FTEs FTEs FTEs
i. ii. iv. v. vi.	Case Managers Social Workers Nurses Clinicians Mental Health Workers Peer Providers	1.0	FTEs FTEs FTEs FTEs FTEs

	LIES
	FTEs
	FTEs
	FTEs
entify Triage Locations for S	Service and Points of Access
urrently Available with Staff	
e hospital emergency rooms, ho	meless shelters, mobile team, etc.)
ompoc Crisis Triage (ER, homeless shelte	
anta Barbara Crisis Triage (ER, Homeless	
anta Maria Crisis Triage (ER, Mobile Team	
titta Maria Offsis Hage (En, Mobile Teat)	
omments	
comments	

If y

Email: Cody.Scott@mhsoac.ca.gov

Phone Number: (916) 445-8692

Please Email this document to: mhsoac@mhsoac.ca.gov